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Bib Data Sheet

CONFIRMATION NO. 3560

SERIAL NUMBER 09/965,880	FILING DATE 09/28/2001 RULE	CLASS 382	GROUP ART UNIT 2621	ATTORNEY DOCKET NO. D/A1532 XER 2 0456
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APPLICANTS
Ying-Wei Lin, Penfield, NY;
Stuart A. Schweid, Pittsford, NY;
Jeng-Nan Shiau, Webster, NY;
Raja Bala, Webster, NY;
Zhigang Fan, Webster, NY;

**** CONTINUING DATA *******
none

**** FOREIGN APPLICATIONS *******
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 10/23/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>John Chang</i> Examiner's Signature Initials				

ADDRESS
FAY, SHARPE, FAGAN, MINNICH & McKEE, LLP
Seventh Floor
1100 Superior Avenue
Cleveland, OH 44114-2518

TITLE
Soft picture/graphics classification system and method

FILING FEE RECEIVED 912	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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